

<b>TRANSMITTAL FORM</b>	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Application Number</td> <td>09/965,697</td> </tr> <tr> <td>Filing Date</td> <td>September 27, 2001</td> </tr> <tr> <td>First Named Inventor</td> <td>Tarlochan DHADIALLA</td> </tr> <tr> <td>Art Unit</td> <td>1647</td> </tr> <tr> <td>Examiner Name</td> <td>Robert Clinton Hayes</td> </tr> <tr> <td>Attorney Docket Number</td> <td>A9526</td> </tr> </table>	Application Number	09/965,697	Filing Date	September 27, 2001	First Named Inventor	Tarlochan DHADIALLA	Art Unit	1647	Examiner Name	Robert Clinton Hayes	Attorney Docket Number	A9526
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(to be used for all correspondence after initial filing)													
Total Number of Pages in This Submission	4												

<b>ENCLOSURES (Check all that apply)</b>		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD  <div style="border: 1px solid black; padding: 2px; font-size: small;">Remarks</div> <p style="font-size: x-small;">The USPTO is hereby directed and authorized to charge the fees indicated, any additional fees due, and credit any overpayments to Deposit Account No. 502860.</p>	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Statement of Notification of Loss of Entitlement to Small Entity Status

<b>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT</b>			
Firm Name	Intrexon Corporation		
Signature	//Chang-Su Lim//		
Printed name	Chang-Su Lim		
Date	September 27, 2007	Reg. No.	60,094

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Signature			
Typed or printed name		Date	

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